

**DECLARATION FOR UTILITY OR** 

DESIGN

PTO/SB/01 (10-05)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Number

Attorney Docket

First Named Inventor

1653-013P

| DESIGN  |   |   |                            | First Named Inventor Walter König |  |                                     |  |  |
|---|---|---|----------------------------|-----------------------------------|--|-------------------------------------|--|--|
| PATENT APPLICATION<br>(37 CFR 1.63)   |   |   | COMPLETE IF KNOWN          |                                   |  |                                     |  |  |
|   |   |   | Application                | n Number                          | 10/562,809                               | //562,809                           |  |  |
| Declaration CR  | ✓ Declar                                  |   | Filing Dat                 | е                                 | December 29, 2005                        |                                     |  |  |
| LJ Submitted OR With Initial  | Submitted after Initial Filing (surcharge | surcharge                                 | Art Unit                   |                                   |  |                                     |  |  |
| riiing  | Filing (37 ČFR 1.16 (e) required)         |   | Examiner                   | Name                              |  |                                     |  |  |
| I hereby declare that:  |   |   |                            |                                   |  |                                     |  |  |
| Each inventor's residence, m  | ailing address                            | and citizenship are                       | e stated b                 | elow povt to the                  | ir name                                  |                                     |  |  |
|   | -   | ·   |                            |                                   |  |                                     |  |  |
| I believe the inventor(s) name which a patent is sought on the  |   |   | inventor(s)                | or the subject r                  | natter which is clair                    | med and for                         |  |  |
| CHILD SEAT FOR  | MOUNTING                                  | ON A VEHIC                                | LE SEA                     | Τ                                 |  |                                     |  |  |
|   |   |   |                            |                                   |  |                                     |  |  |
|   |   |   |                            |                                   |  |                                     |  |  |
|   |   | (Title of the                             | Invention)                 |                                   |  |                                     |  |  |
| the specification of which  | ,   | •••••                                     | ,                          |                                   |  |                                     |  |  |
| is attached hereto  |   |   |                            |                                   |  |                                     |  |  |
| OR  | •   |   |                            | •                                 | 1  |                                     |  |  |
| was filed on (MM/DD/)   | ~~ [                                      | 12/29/2005                                | as Unit                    | :<br>ed Statos Applia             | cation Number or P                       | ICT International                   |  |  |
|   |   |   | J as oniii                 |                                   |  | or international                    |  |  |
| Application Number 10   | 0/562,809                                 | and was amended                           | d on (MM/E                 | D/YYYY)                           |  | (if applicable).                    |  |  |
| I hereby state that I have review amended by any amendment  |   |   | of the abov                | e identified spe                  | cification, including                    | the claims, as                      |  |  |
|   | •   |   |                            |                                   | *  |                                     |  |  |
| I acknowledge the duty to d<br>continuation-in-part applicatio  | isclose informa<br>ns, material inf       | tion which is mater<br>ormation which bec | rial to pate<br>ame availa | ntability as defi                 | ned in 37 CFR 1.<br>e filing date of the | 56, including for prior application |  |  |
| and the national or PCT interr  | national filing da                        | te of the continuation                    | n-in-part a                | pplication.                       | _  |                                     |  |  |
| I hereby claim foreign priority inventor's or plant breeder's r   |   |   |                            |                                   |  |                                     |  |  |
| country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date |   |   |                            |                                   |  |                                     |  |  |
| application for patent, invento<br>before that of the application of  |   |   | ite(s), or ai              | ny PCT internation                | onal application ha                      | ving a filing date                  |  |  |
| Prior Foreign Application   | I   | Foreign Filing                            | -                          | Priority                          |  | opy Attached?                       |  |  |
| Number(s)<br>103 29 923.8   | Country                                   | (MM/DD/YY)<br>07/02/2003                  | (Y)                        | Not Claime                        | d YES                                    | NO NO                               |  |  |
| 103 29 923.0  | Germany                                   | 07/02/2003                                |                            | 닏                                 |  |                                     |  |  |
|   |   |   | j                          | لـــا                             |  |                                     |  |  |
|   | 1   |   | 1                          |                                   |  |                                     |  |  |
|   |   |   | Ī                          |                                   |  |                                     |  |  |
| Additional foreign ap   | plication numbe                           | ers are listed on a su                    | pplementa                  | l priority data sh                | eet PTO/SB/02B a                         | ttached hereto.                     |  |  |
|   |   | [Page 1                                   | of 21                      |                                   |  |                                     |  |  |

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

## Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. DECLARATION — Utility or Design Patent Application The address OR Correspondence 022831 associated with address below Customer Number:

## Direct all correspondence to: Name Address City State ZIP Country Telephone Email **WARNING:** Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Walter Inventor's Signature Walter For March 2006 Residence: City Country Citizenship Münsingen Germany German Mailing Address c/o Schweitzer Comman Gross & Bondell LLP 292 Madison Avenue - 19th Floor City State Zip Country **New York** 10017 NY US

supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

Additional inventors or a legal representative are being named on the 1

PTO/SB/02A (09-04)
Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. ADDITIONAL INVENTOR(S)

| DECLARATION   | Supplemental Sheet                                   |                        |  |               |              |  |  |
|---|--|------------------------|--|---------------|--------------|--|--|
|   |  |                        |  | Pa            | age 1 of 1   |  |  |
| Name of Additional Joint Inventor, if any:                                    |  |                        | A petition has been filed for this unsigned inventor |               |              |  |  |
| Given Name (first and middle (if any  | Family Name or Surname                               |                        |  |               |              |  |  |
| Uwe   |  | Schobert               |  |               |              |  |  |
| Inventor's Signature More character   |  |                        |  | Date          | , 13/03/2006 |  |  |
| Kirchenlamitz<br>Residence: City  | Circhenlamitz  |                        |  | Germ<br>Citiz | an<br>enship |  |  |
| c/o Schweitzer Cornman Gross & Bondell LLP<br>292 Madison Avenue - 19th Floor |  |                        |  |               |              |  |  |
| Mailing Address   |  |                        |  |               |              |  |  |
| New York  | NY   |                        | 10017  | us            |              |  |  |
| City  | State  |                        | Zip  | Cou           | ntry         |  |  |
| Name of Additional Joint Inventor, if an                                      | A petir  | tion has been filed fo | r this unsigne                                       | d inventor    |              |  |  |
| Given Name (first and middle (if any)   | )  |                        | Family Nar   | ne or Surnam  | 9            |  |  |
|   |  |                        |  |               |              |  |  |
| Inventor's<br>Signature   |  |                        |  | Date          |              |  |  |
| Residence: City   | State  |                        | Country  |               | Citizenship  |  |  |
| residence. Oity   Citizenship   |  |                        |  |               |              |  |  |
| Mailing Address   |  |                        |  |               |              |  |  |
|   |  |                        |  |               |              |  |  |
| City  | State  |                        | Zip  | Coun          | try          |  |  |
| Name of Additional Joint Inventor, if any                                     | A petition has been filed for this unsigned inventor |                        |  |               |              |  |  |
| Given Name (first and middle (if any))  | Family Name or Surname                               |                        |  |               |              |  |  |
|   |  |                        |  |               |              |  |  |
| Inventor's<br>Signature   |  |                        |  | Date          |              |  |  |
|   |  |                        |  |               |              |  |  |
| Residence: City   | State  |                        | Country Citizenship                                  |               | Citizenship  |  |  |
| Mailing Address   |  |                        |  |               |              |  |  |
| Minimid Volumes   |  |                        |  | 1             |              |  |  |
| City  | State  |                        | Zip  | Count         | ry           |  |  |

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

| Application Number     | 10/562,809                   |
|------------------------|------------------------------|
| Filing Date            | December 29, 2005            |
| First Named Inventor   | Walter König                 |
| Title                  | Child Seat for Mounting On A |
| Art Unit               |                              |
| Examiner Name          |                              |
| Attorney Docket Number | 1653-013P                    |

| I hereby revoke a  | all previ   | ous powers of attorney                   | given in the a    | above-id     | entified applic    | cation.    |                          |
|--|---|--|-------------------|--------------|--------------------|------------|--------------------------|
| I hereby appoint:  |   |  |                   |              |                    |            | <del></del>              |
|  | actitioners associated with the Customer Number: 022831 |  |                   |              |                    |            |                          |
| OR   |   |  |                   |              | <u>-</u>           |            |                          |
| Practitioner(s)  | named be  | elow:                                    |                   |              |                    |            |                          |
|  |   | Name                                     |                   |              | Registra           | tion Numbe | er                       |
| <u> </u>   |   |  |                   |              |                    |            |                          |
|  |   |  |                   |              |                    |            |                          |
|  |   |  |                   |              | <del></del>        |            |                          |
|  | ****  |  |                   |              |                    |            |                          |
| as my/our attorney(s)<br>Trademark Office con  | or agent(<br>nected th                                  | s) to prosecute the application erewith. | n identified abov | e, and to t  | transact all busin | ess in the | United States Patent and |
| Please recognize or c  | hange the   | e correspondence address fo              | r the above-iden  | tified appli | cation to:         | :          |                          |
| The address  | associat  | ed with the above-mentioned              | I Customer Numl   | oer:         |                    |            | ·                        |
| OR   |   |  |                   |              |                    | 7          |                          |
| The address  | s associat  | ted with Customer Number:                | 1                 | •            |                    |            |                          |
| OR Firm or   |   | <u></u>                                  |                   |              |                    |            |                          |
| Individual   | Name  |  |                   |              |                    |            |                          |
| Address  |   |  |                   |              |                    | •          |                          |
| City   |   |  |                   | State        |                    |            | 7:                       |
| Country  |   |  |                   | State        |                    | <u> </u>   | Zip                      |
| Telephone  |   |  |                   | Email        | -                  |            |                          |
| l am the:  |   |  |                   |              |                    |            |                          |
| Applicant/Inventor.  |   |  |                   |              |                    |            |                          |
| Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |   |  |                   |              |                    |            |                          |
| SIGNATURE of Applicant or Assignee of Record   |   |  |                   |              |                    |            |                          |
| Signature  | \cu   |  |                   |              |                    | Date       | 13/03/2006               |
| Name   | Walter K  | ionig /                                  |                   |              | 7                  | elephone   |                          |
| Title and Company  |   |  |                   |              |                    |            |                          |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |   |  |                   |              |                    |            |                          |
| *Total of 2  | f   | orms are submitted.                      |                   |              |                    |            |                          |

This collection of Information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nur

## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

| Application Number     | 10/562,809                   |
|------------------------|------------------------------|
| Filing Date            | December 29, 2005            |
| First Named Inventor   | Walter König                 |
| Title                  | Child Seat for Mounting On A |
| Art Unit               |                              |
| Examiner Name          |                              |
| Attorney Docket Number | 1653-013P                    |

| I hereby revoke all previous powers of attorney given in the above-identified application.   |  |  |                  |              |                  |                |                          |  |
|--|--|--|------------------|--------------|------------------|----------------|--------------------------|--|
| I hereby appoint:  |  |  |                  |              |                  |                |                          |  |
| Practitioners ass  | Practitioners associated with the Customer Number: |  |                  |              | 022831           |                |                          |  |
|  |  |  |                  |              |                  |                |                          |  |
| Practitioner(s) na   | amed be  | elow:  |                  |              |                  |                |                          |  |
|  |  | Name   |                  |              | Registr          | ation Numbe    | r                        |  |
|  |  |  |                  |              |                  |                |                          |  |
|  |  |  |                  |              |                  |                |                          |  |
|  |  |  |                  |              |                  |                |                          |  |
|  |  |  |                  |              |                  |                |                          |  |
| as my/our attorney(s) or<br>Trademark Office conne   |  | <ul><li>s) to prosecute the application i<br/>erewith.</li></ul> | identified above | e, and to to | ransact all busi | iness in the U | Inited States Patent and |  |
| Please recognize or cha  | ange the   | e correspondence address for the                                 | he above-identi  | fied applic  | cation to:       |                |                          |  |
|  | _  | ed with the above-mentioned C                                    |                  |              |                  | . '            | -                        |  |
| OR   | 2300.21  |  | addition realist | <b>ν1.</b>   | <u> </u>         | 7              |                          |  |
| The address a  | associat   | ed with Customer Number:   |                  |              | •                | 8-             |                          |  |
| OR   |  |  | <del>.</del>     |              |                  |                |                          |  |
| Firm or Individual N   | Name   |  |                  |              |                  |                |                          |  |
| Address  |  | i  |                  |              | :                |                |                          |  |
| City   |  |  |                  | State        |                  |                | <del></del>              |  |
| City<br>Country  |  |  |                  | State        |                  |                | Zip                      |  |
| Telephone  | Email  |  |                  |              |                  |                |                          |  |
| l am the:  |  |  |                  |              |                  |                |                          |  |
| Applicant/Inventor.  |  |  |                  |              |                  |                |                          |  |
| Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |  |  |                  |              |                  |                |                          |  |
| SIGNATURE of Applicant or Assignee of Record   |  |  |                  |              |                  |                |                          |  |
| Signature  | \ "  | Mue chlotat  |                  |              |                  | Date           | 13/03/2006               |  |
|  | Uwe Schobert Telephone                             |  |                  |              |                  |                |                          |  |
| Title and Company  |  |  |                  |              |                  |                |                          |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |  |  |                  |              |                  |                |                          |  |
| *Total of 2  | f  | orms are submitted.  |                  |              |                  | <del></del>    |                          |  |

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.